

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF EDWARD KOMITO	COURT CASE NUMBER 5:19-cv-04679-JLS
DEFENDANT Thomson Reuters Holdings, Inc et al.	TYPE OF PROCESS SUMMONS & COMPLAINT

SERVE AT NAME OF INDIVIDUAL, COMPANY, CORPORATION ETC TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
Thomson Reuters Holdings, Inc
ADDRESS (Street or RFD, Apartment No. City, State and ZIP Code)
3 Times Square, New York, NY 10036

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

EDWARD KOMITO
1326 DOE TRAIL ROAD
ALLENTOWN, PA 18104

Number of process to be served with this Form 285

1

Number of parties to be served in this case

1

Check for service on U.S.A.

12/10/19 4:19 PM

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service).

Fold

Fold

Thomson Reuters Corporation, 610 Opperman Drive, Eagan, MN 55123

Signature of Attorney other Originator requesting service on behalf of <i>Edward Komito</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 610-395-7898	DATE 10/21/19
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 66	District to Serve No. 054	Signature of Authorized USMS Deputy or Clerk <i>M. Shelnish</i>	Date 10/21/19
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I hereby certify and return that I ☐ have personally served ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc shown at the address inserted below

☒ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date
11/8/19
Time
12:40
☐ am
☒ pm
Signature of U.S. Marshal or Deputy
[Signature] 4347

Service Fee \$65.00	Total Mileage Charges (including endeavors) \$2.38	Forwarding Fee 8.00	Total Charges \$75.38	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS

11/8/19 security refused access

- DISTRIBUTE TO:**
- 1 CLERK OF THE COURT
 - 2 USMS RECORD
 - 3 NOTICE OF SERVICE
 - 4 BILLING STATEMENT* To be returned to the U.S. Marshal with payment if any amount is owed. Please remit promptly payable to U.S. Marshal
 - 5 ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM 285
Rev 11/13

19-4679-1 ✓